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TO: Commissioner for Patents, Art Unit 1654, Examiner Kosar

FAX NO.: (703) 872-9306

FROM: D. Benjamin Borson, Ph.D. Reg. No: 42,349

RE: Application No: 10/643,450

DATE: April 8, 2005 Total Pages : 11

Original will follow by mail: No

If you do not receive all of the pages, please call Ben Borson at 415.362.3800.

- * Transmittal Letter
- * Petition for Extension of Time
- * Reply to Office Action
- * Authorization to use Deposit Account No: 06-1325.
- * Certificate of Facsimile Transmission.

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APR 08 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application

Inventor(s): Breier et al.

Appln. No.: 10/643,450

Confirm. No.: 4401

Filed: August 19, 2003

Title: REGULATION OF ANGIOTENSIN II
RECEPTORS IN MAMMALS SUBJECT TO
FETAL PROGRAMMINGPATENT APPLICATION

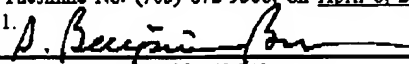
Art Unit: 1654

Examiner: Andrew D. Kosar

Customer No. 23910

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8

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D. Benjamin Borson, Ph.D., Reg. No. 42,349

(Attorney Signature)

Signature Date: April 8, 2005.

REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted with this communication in connection with the above-identified application are the following:

- | | |
|----------|--|
| <u>X</u> | A Reply under 37 C.F.R. §1.111 to the Office Action dated February 8, 2005. |
| <u>X</u> | A Petition for an Extension of Time under 37 C.F.R. §1.136. |
| <u>X</u> | Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established. |
| <u>X</u> | A fee for extension of time for response under 37 C.F.R. §1.136 filed within <u>1</u> month after the original time for response of \$ <u>60</u> is due. |

- 1 -

Attorney Docket No.: ERNZ 1018 US1
dbb/ERNZ/1018 US1.108.Transmittal.wpd

201.001-010204
04/08/05-11:05

X No fee for addition of claims under 37 C.F.R. §1.16 is due:

FEEs	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	Rate Small Entity/Other Than Small Entity	Total
TOTAL CLAIMS (37 CFR 1.16(c))	<u> 19 </u> * -	<u> 20 </u> **	—	X \$ 25.00 X \$ 50.00	\$0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	<u> 1 </u> * -	<u> 5 </u> ***	—	X \$ 100.00 X \$ 200.00	\$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.16(d))				+ \$180.00 + \$360.00	\$0
				TOTAL	\$0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number of Previously Paid For" in this space is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" in this space is less than 3, enter "3".

The total fee required with this communication is \$ 60 and is to be paid as follows:

 X Please charge Deposit Account No. 06-1325 in the amount of \$ 60 .

 X The Commissioner is hereby authorized to charge any deficiencies or credit overpayment to Deposit Account No. 06-1325.

Respectfully submitted,

Date: April 8, 2005

By:

D. Benjamin Borson, Ph.D.

Reg. No. 42,349

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